

REMARKS

This application has been carefully reviewed in light of the Office Action dated February 25, 2008. Claims 1, 3 to 8, 10 to 14, 100, 101, and 103 are in the application, with Claims 1, 5, 8, 12, 100 and 101 being independent. Claims 1, 5, 7, 8, 12, 14, 100, 101 and 103 have been amended herein. Reconsideration and further examination are respectfully requested.

Claims 1, 3, 4, 6 to 11, 13, 14, 100 and 103 were rejected under 35 U.S.C. § 102(e) over U.S. Publication No. 2005/0060198 (Bayne). Claims 5 and 12 were rejected under 35 U.S.C. § 103(a) over Bayne in view of U.S. Patent No. 5,363,842 (Mishelevich). Claim 101 was rejected under 35 U.S.C. § 103(a) over Bayne in view of Mishelevich and U.S. Patent No. 5,894,841 (Voges). Reconsideration and withdrawal of the rejections are respectfully requested.

Claims 1, 5, 8 and 12

The invention of Claims 1, 5, 8 and 12 generally concerns managing the health of a patient using a portable terminal. The portable terminal is arranged to be carried by the patient and stores personal information for the patient.

According to one aspect of the invention, the portable terminal includes an emergency notification switch for causing the portable terminal to enter an emergency notification mode, in which communication with a medical facility or to stored medical information is provided to the portable terminal.

By virtue of this arrangement, it is ordinarily possible to notify an emergency situation immediately from the patient's portable terminal, thus quickly putting

the patient in contact with the necessary people and/or information.

Referring specifically to claim language, independent Claim 1 is directed to a health management system for managing health of each patient carrying a portable terminal. The system includes a portable terminal which is arranged to be carried by a patient and includes a display screen, radio communication means for accessing a predetermined radio communication network, storage means for storing personal information of the patient, wherein the personal information includes information of a clinical chart of the patient and a prescription, an input/output device for supporting health management for the patient, and an emergency notification switch for causing the portable terminal to enter an emergency notification mode. The system further includes a database including personal information storage means for storing the personal information about each patient carrying the portable terminal, medical information storage means for storing information about a medical facility, a drugstore, a medicine, and the input/output device, and communication means for communicating with the portable terminal through the radio communication network. The radio communication means transmits part of the personal information stored in the storage means in starting to communicate with the database. The database further includes identification means for identifying the patient of the portable terminal by collating the part of the information transmitted from the radio communication means with information stored in the personal information storage means. In addition, the database includes emergency handling means which is activated and provides either communication with a medical facility whose information is stored in the medical information storage means or information stored in the medical information storage means,

which is necessary for the identified patient for the portable terminal, in accordance with information transmitted from the radio communication means, to the portable terminal when the portable terminal enters the emergency notification mode.

Independent Claim 8 is directed to a method substantially in accordance with the system of Claim 1.

Independent Claim 5 is directed to a health management system for managing health of each patient carrying a portable terminal. The system includes a portable terminal which is arranged to be carried by a patient and includes a display screen, radio communication means for accessing a predetermined radio communication network, a storage means for storing personal information of the patient, wherein the personal information includes information of a clinical chart of the patient and a prescription, an input/output device for supporting health management for the patient, and an emergency notification switch for causing the portable terminal to enter an emergency notification mode. The system further includes a database including personal information storage means for storing the personal information about each patient carrying the portable terminal, medical information storage means for storing information about a medical facility, a drugstore, a medicine, and the input/output device, and communication means for communicating with the portable terminal through the radio communication network. The radio communication means transmits part of the personal information stored in the storage means in starting to communicate with the database. The input/output device is an inhaler for discharging a medicine in the form of fine droplets to make the patient inhale the droplets, and the information about the input/output device includes information about

handling of the inhaler. The database further includes identification means for identifying the patient of the portable terminal by collating the part of the information transmitted from the radio communication means with information stored in the personal information storage means. In addition, the database includes emergency handling means which is activated and provides either communication with a medical facility whose information is stored in the medical information storage means or information stored in the medical information storage means, which is necessary for the identified patient for the portable terminal, in accordance with information transmitted from the radio communication means, to the portable terminal when the portable terminal enters the emergency notification mode.

Independent Claim 12 is directed to a method substantially in accordance with the system of Claim 5.

The applied art is not seen to disclose or suggest the features of Claims 1, 5, 8 and 12, and in particular is not seen to disclose or suggest at least the features of (i) a portable terminal which accesses a radio communication network and stores personal information for a patient, and is carried by the patient, (ii) an emergency notification switch included with the portable terminal for causing the portable terminal to enter an emergency notification mode, and (iii) emergency handling means which provide communication with a medical facility or stored medical information to the portable terminal, in accordance with information transmitted from the portable terminal, when the portable terminal enters the emergency notification mode.

As understood by Applicants, Bayne is directed to a system of mobile clinicians, each having his/her own portable computer. When a mobile care entity receives

a request for service, the entity selects a mobile clinician and dispatches the mobile clinician to the patient's premises. See Bayne, Abstract.

Page 4 of the Office Action asserts that Bayne (Abstract and paragraphs [0036] and [0039] to [0041]) discloses a portable terminal carried by a user.

However, Bayne's portable computer is carried by the clinician, not the patient. See Bayne, Abstract. Accordingly, Bayne is not seen to disclose or suggest a portable terminal carried by a patient at all, much less a portable terminal which accesses a radio communication network and stores personal information for a patient, and is carried by the patient.

Bayne is also not seen to disclose or suggest an emergency notification switch included with the portable terminal, for causing the portable terminal to enter an emergency notification mode.

Page 3 of the Office Action asserts that Bayne (paragraphs [0032] and [0078]) discloses an emergency notification switch for causing a portable terminal to enter an emergency notification mode. Page 9 of the Office Action further asserts that "[Bayne] has the emergency notification capability to talk to the emergency facility discussed in paragraph 32".

However, an "ability" to notify an emergency is not seen to correspond to an emergency notification switch included with a patient's portable terminal. In fact, the cited portions of Bayne correspond to a triage processing block at a call center. See Bayne, paragraph [0032]. Bayne does suggest a "panic button" manually activated by a patient, but there is no suggestion that such a panic button is on the mobile device. See Bayne,

paragraph [0078]. In fact, configuring the patient's "panic button" on the clinician's mobile device would not make sense, because the patient and doctor are ordinarily in different locations.

Furthermore, Bayne is not seen to disclose or suggest emergency handling means which provide communication with a medical facility or stored medical information to the portable terminal, in accordance with information transmitted from the portable terminal, when the portable terminal enters the emergency notification mode.

Page 3 of the Office Action asserts that Bayne (paragraphs [0032], [0050] and [0078]) discloses an emergency handling means which provides communication with a medical facility or stored information to the portable terminal when the portable terminal enters the emergency notification mode.

However, the cited portions of Bayne simply disclose a triage processing block at a call center, or an admissions desk at a hospital communicating with the clinician's mobile device. See Bayne, paragraphs [0032] and [0050]. Moreover, as discussed above, Bayne's "panic button" is not associated with Bayne's portable computer. See Bayne, paragraph [0078].

Thus, nothing in Bayne is seen to correspond to emergency handling means which provide communication with a medical facility or stored medical information to a portable terminal carried by a patient, in accordance with information transmitted from the portable terminal, when the portable terminal enters an emergency notification mode.

Mishelevich and Voges have been reviewed and are not seen to remedy the shortcomings of Bayne.

Therefore, independent Claims 1, 5, 8 and 12 are believed to be in condition for allowance, and such action is respectfully requested.

Claims 100 and 101

The invention of Claims 100 and 101 generally concerns providing medical information from a database about health, a medical treatment or a medicine. User patient information is received from a portable terminal through a network.

According to one aspect of the invention, an emergency notification for causing the portable terminal to enter an emergency notification mode is received, and communication with a medical facility or stored medical information is provided to the portable terminal of the identified patient in the emergency notification mode.

By virtue of this arrangement, it is ordinarily possible to notify an emergency situation immediately from the patient's portable terminal, and to quickly put the identified patient in contact with the necessary people and/or information.

Referring specifically to claim language, independent Claim 100 is directed to an information provision method for providing medical information about health, a medical treatment or a medicine from a database. The method includes receiving, from a portable terminal through a network, patient information stored in the portable terminal and an emergency notification for causing the portable terminal to enter an emergency notification mode, wherein the patient information includes a clinical chart of the patient and a prescription, identifying a patient of the portable terminal by collating the patient information transmitted from the portable terminal with personal information stored in the database, and providing either communication with a medical facility or the medical

information stored in the database to the portable terminal of the identified patient in the emergency notification mode.

Independent Claim 101 is directed to a method substantially in accordance with the method of Claim 100, but further specifies that the personal information includes information of a clinical chart of the patient and a prescription, and further includes an inhaler which discharges a medicine on the basis of an ink-jet scheme using heat.

The applied art is not seen to disclose or suggest the features of Claims 100 and 101, and in particular is not seen to disclose or suggest an emergency notification for causing a portable terminal of an identified patient to enter an emergency notification mode, and providing communication with a medical facility or stored medical information to the portable terminal in the emergency notification mode.

In particular, as discussed in detail above, Bayne fails to disclose emergency handling means which provide communication with a medical facility or stored medical information to a patient's portable terminal, when the portable terminal enters an emergency notification mode. Accordingly, Bayne is also not seen to disclose or suggest the above-noted features.

Mishelevich and Voges have been reviewed and are not seen to remedy the shortcomings of Bayne.

Therefore, independent Claims 100 and 101 are believed to be in condition for allowance, and such action is respectfully requested.

The dependent claims are also submitted to be patentable because they set forth additional aspects of the present invention and are dependent from the independent

claims discussed above. Therefore, separate and individual consideration of each dependent claim is respectfully requested.

No other matters being raised, the entire application is believed to be in condition for allowance, and such action is courteously solicited.

REQUEST FOR INTERVIEW

Applicants believe that the application is in condition for allowance.

However, if the Examiner does not share this view, Applicants request that the Examiner conduct a personal or telephonic interview with Applicants' representative regarding this case. If such an interview has not been conducted before the Examiner next takes up the case for consideration, Applicants respectfully request that the Examiner contact Applicants' representative as indicated below.

No fees are believed due; however, should it be determined that additional fees are required, the Director is hereby authorized to charge such fees and any additional fees under 37 C.F.R. §§ 1.16 and 1.17 which may be required during the entire pendency of this application, or to credit any overpayment, to Deposit Account 06-1205.

Applicants' undersigned attorney may be reached in our Costa Mesa, California office by telephone at (714) 540-8700. All correspondence should be directed to our address given below.

Respectfully submitted,

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